

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OM	ΒA	PPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per re



UNIFORM LIMITED OFFERING EXE	MPTION 07051861
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Sun River #1, LLC Private Placement Memorandum	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section	4(6) \[ULOE
Type of Filing: New Filing Amendment	PROCESSED
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	MAY 0 7 2007
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THORACON
Sun River #1, LLC	THOMSON FINANCIAL
Address of Executive Offices (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
10200 West 44th Avenue, Suite 210E, Wheatridge, CO 80033	303-421-4980
Address of Principal Business Operations (Number and Street, City, State, Zip Cod (if different from Executive Offices) -same-	c) Telephone Number (Including Area Code)
Brief Description of Business	
Oil and gas drilling and production	
Type of Business Organization	
	r (please specify):
husiness trust	nited Liability Company
Month Year	Teed Blability Company
Actual or Estimated Date of Incorporation or Organization:	stimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for S	tate:
CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation 77d(6).	D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offeri and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address.	ing. A notice is deemed filed with the U.S. Securities in below or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuphotocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only rethereto, the information requested in Part C, and any material changes from the information previously sunot be filed with the SEC.	port the name of the issuer and offering, any changes pplied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) fo ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the	r sales of securities in those states that have adopted e Securities Administrator in each state where sales

ATTENTION-

are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

A BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	Asses (1005) Minuted and Mark Sales Committee Annie
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equi	ty securities of the issu
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership iss	uers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General	
	ing Partner
Full Name (Last name first, if individual)	
10200 West 44th Avenue, Suite 210E, Wheatridge, Colorado 80033 Business or Residence Address (Number and Street, City, State, Zip Code)	
(Name: and street, City, State, Dip Code)	,
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer N Director General	and/an
Contract of the Contract of th	and/or ing Partner
Full Name (Last name first, if individual)	
1350 Central Avenue, 3rd floor, Los Alamos, New Mexico 87544	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Charle Day 4 Add Annual Charles	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General	
Steve Weathers Manage Full Name (Last name first, if individual)	ing Partner
·	
370 Seventeenth Street, Suite 2500, Denver, Colorado 80202 Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General	and/or
David Surgnier Managi	ng Partner
Full Name (Last name first, if individual)	
914 Addleman Street, Joliet, Illinois 60431	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General	
Ceneral s	and/or ng Partner
Full Name (Last name first, if individual)	
7609 Ralston Road, Arvada, Colorado 80002	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General a	nd/or
	ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	· · .
(Mannos and Street, City, State, Zip Code)	
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General a	
	g Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	
Topics of this sheet, as hecessaly)	

	水域域			B	INFORMA	TION ABO	UT OFFER	ING Call		ار با ایان ایان مالکامی کا		
1. Has	the issuer so	ld, or does	the issuer	intend to s	ell, to non-	accredited	investors	in this offe	ring?		Yes	No
		,			n Appendi				=	****************	. [X].	Ц
2. Wha	nt is the mini	mum inves									. s 1.	000
											Yes	No
	s the offering										. 🛛	
com If a p or st a bro	r the information or single or so to be liberson to be liberson to be liberson to be liberson or deale	milar remun isted is an a name of the r, you may	eration for ssociated p broker or c set forth th	solicitation erson or ag lealer. If m	n of purcha: sent of a bro sore than fiv	sers in conr ker or deal ve (5) perso	nection with or registero ons to be lis	h sales of se ed with the sted are asso	curities in	the offering	χ.	
	e (Last name	e first, if in	dividual)							 -		
None Business	or Residence	e Address (Number or	d Street (ity State	7:- Code	_					
_ 02111000	or residence	o Maaress (ivamoer an	id Sireei, C	iny, state, .	•						
Name of	Associated E	Broker or D	ealer								 -	.
States in	Which Deep	n Listed IV	. O-11-14	,	0.12.1							
	Which Perso											
(0	ck "All State	of check	. majvidua	ii States)	*****************		••••••••		**************	••••••••	<u>∑</u> A	II States
[AL]		AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL MT	NE	IA NV	KS NH	KY NJ	[LA] [NM]	ME	MD.	MA	MI	MN	MS	MO
RI	SC	SD	TN	TX	UT)	NY VT	NC VA	ND WA	OH WV	OK]	OR WY	PA PR
-							323	<u></u>			W I	(PK)
Full Nam	e (Last name	first, if inc	lividual)						-			
Business	or Residence	c Address (Number ar	nd Street, C	City, State.	Zip Code)				-		
				, , , , , , , , , , , , , , , , , , ,								
Name of A	Associated B	roker or De	aler	- · · -								
States in \	Which Person	n Listed Ha	s Solicited	or Intende	to Solicit	Durahasara	 · 					
	ck "All State											1.0
									***************************************	***************************************	∐ Ai	1 States
AL IL	AK IN	[AZ]	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	ĪD
MT	NE	NV	KS NH	KY NJ	LA NM	ME NY	MD	MA ND	MI	MN	MS	MO
RI	SC	SD	TN	TX	UT	VT	NC VA	WA	OH WV	ÖK Wl	OR WY	PA PR
Full Name	(Last name	first if ind	ividual)									
	(,										
Business	or Residence	Address (1	Vumber an	d Street, C	ity, State, 2	Zip Code)	-					
Name of A	ssociated Br	rolean on Da	-1			· · · · · · · · · · · · · · · · · · ·	<u> </u>					
ivanic of A	regociated Di	oker or De	ассг									
States in V	Vhich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers	<u> </u>			·		
	k "All States								*****************	***************************************	□ All	States
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	IN	IA	KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL	GA NOW	HI GOOD	ID I
MT	NE	NV	NH]	NJ	NM	NY	NC	ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

	this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security	Aggregate Offering Price	Amount Aiready Sold
			3014
	Debt		. \$
	Equity LLC Ownership interests	<u> 480,000</u>	\$480,000
	Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)		
	Total	<u>480,000</u>	\$ <u>480,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ <u>338,200</u>
	Non-accredited Investors	14	<u>\$201,800</u>
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this tiling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$ N/A
	Regulation A		\$
	Rule 504		\$
	Total	N/A	\$ N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s -0-
	Printing and Engraving Costs		s <u>-0-</u>
	Legal Fees		s -0-
	Accounting Fees	_	s0-
	Engineering Fees		s <u>-0-</u>
	Sales Commissions (specify finders' fees separately)		s -0-
	Other Expenses (identify)	_	s -0-
	Total	_	s -0-

3.	C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE)F PRO	CEEDS* * ;		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groceeds to the issuer."	n l		¢ / Q	0,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted graph proceeds to the issuer set forth in response to Part C — Question 4.b above.	for		<u>- 70</u>	<u>0,000</u>
			ayments to Officers, Directors, &	Pa	yments to
	Salarias and Core	,	Affiliates		Others
	Salaries and fees	🔲 💲	0-	\$	0
	Purchase of real estate	🗆 \$_	-0-		0
	Purchase, rental or leasing and installation of machinery and equipment		0		•
	Construction or leasing of plant buildings and facilities	[] \$_	0-	 s	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of small as			. 🗆 \$_	
	issuer pursuant to a merger)	🗌 \$_	-0-	S _	0
	Repayment of indebtedness	🗌 \$_	0-	□\$_	0
	Other (specify): Drilling Fyrance	🔲 💲	0-		
	Other (specify): Drilling Expense	- 🗆 s -	<u>-0-</u>	X \$ <u>1</u>	80,000
	Completion Expense	-			
	Column Taxal	🗀 \$_	0-	□ \$ <u>3</u>	00,000
	Column Totals	🗀 💲	0	□ \$ 4	80,000
	Total Payments Listed (column totals added)		□\$ <u>48</u>	0,000	_
T	D. FEDERAL SIGNATURE				
ie i	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice to be signed by the undersigned duly authorized person. If this notice constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Committee formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) or the constitution of the constituti	ce is fil ission, f Rule 5	ed under Rul upon writter 502,	e 505, th	e following of its staff,
	er (Print or Type) Signature	Date	· , A		1 -
	River #1, LLC		11/1	PR	07
	e of Signer (Print or Type) Title of Signer (Print of Type)	·			 ./
es	ley F. Whiting Manager of Sun River #1, LLC	, Pre	sident o	of Sui	n River
					ergy, I
				•	

72.65		E. STATE SIGNATURE
1.	Is any party described in 17 CFR 23 provisions of such rule?	0.262 presently subject to any of the disqualification Yes No
		See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby under D (17 CFR 239.500) at such times a	takes to furnish to any state administrator of any state in which this notice is filed a notice on Forms is required by state law.
3.	The undersigned issuer hereby under issuer to offerees.	rtakes to furnish to the state administrators, upon written request, information furnished by th
4.	The street of th	at the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform of the state in which this notice is filed and understands that the issuer claiming the availability establishing that these conditions have been satisfied.
		the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
fesner /1	Print or Type) River #1, LLC	Signature Date
		I IN LEAK LONG OF THE ALL AND CONTROL OF THE
Sun	Print or Type)	Title (Print or Type) Manager of Sun River #1, LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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	to non-a	d to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pi	4 f investor and urchased in State t C-Item 2)		under Sta (if yes, explana	lification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		X					•		X
AK		X							x
AZ		X							X
AR		X							X
CA		Х					·		<u>х</u>
со		X		1	38,200				x
СТ		Х		1	24,000				X
DE		Х							Х
DC	_	Х							Х
FL		X		·					Х
GA		<u>x</u>							Х
HI		<u> </u>							Х
ID		X					_		Х
IL		Х							Х
IN		Х							х
IA		X							Х
KS		X							Х
KY		X							X
LA		X							Х
ME		Х							х
MD		X		1	6,000				х
MA		X							Х
MI		Х							Х
MN		Х							х
MS		X							х

SAPPENDIX 2 3 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No MO X X MT X X NE X X ΝV X Х NH Х X NJ X 12,000 X NM Х X NY Х X NC X Х ND X X ОН X X OK \mathbf{X} Х OR X Х PA Х Х RI X X SC Х Х SD X X TN X Х TX X Х UT X 1 7,400 Х VTX X VA X 30,000 Х WA X Х W۷ Х Х WI Х Х

1	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		x		7	130,800				x
PR		Х							<u>х</u>

